

Chairman Dingell at the Subcommittee on Oversight and Investigations Hearing Entitled "Post-Katrina Health Care in the New Orleans Region: Progress and Continuing Concerns - Part II"

Statement of Congressman John D. Dingell, Chairman
Committee on Energy and Commerce

SUBCOMMITTEE ON
OVERSIGHT AND INVESTIGATIONS
HEARING ENTITLED "POST-KATRINA HEALTH CARE IN THE NEW ORLEANS REGION: PROGRESS AND CONTINUING CONCERNS" PART II
August 1, 2007

Today, we will hear from public health leaders and representatives from the New Orleans area who are helping the brave citizens of that region rebuild their lives and their communities. We should pay close attention to the lessons they can teach us about the tenacity and creativity it takes for a health care system to recover from a national disaster.

At our last hearing on this topic, I promised that we would focus on stabilizing the health care crisis in the New Orleans area and that we would keep our focus on that issue until the system is stable. This is the second in a series of oversight hearings on these issues, and I assure you, it will not be the last.

Four and a half months ago, we heard testimony from doctors and clinic administrators about people lining up in their cars overnight, simply so they could get attention to basic health needs such as prescription eyeglasses and asthma medicine from health care professionals working in tents with flashlights. Their stories described a landscape we might see in third world countries, not one we could imagine here in our own country.

I am pleased that Secretary Leavitt took to heart the moving testimony we heard, and released \$100 million in discretionary Deficit Reduction Act (DRA) monies to target primary care in the greater New Orleans region. I thank the Secretary. These much-needed funds will soon flow to clinics in the greater New Orleans area that provide primary and preventive care "such as vaccinations, pre-natal checkups, and basic first aid" to poor and uninsured patients.

These funds will help fill in some "but certainly not all" of the holes in what is left of a shattered health care system in the New Orleans region. As we will hear today, that system is still precarious as we mark the two-year anniversary of Hurricane Katrina. If the system were a patient, we might say it is still in the Intensive Care Unit. We will hear from today's witnesses that the area's economic recovery is stalled because the health care system remains fragmented and overwhelmed.

" There continue to be critical shortages of professional health care workers;

" Doctors are having difficulty sustaining their practices and are moving out of a city that desperately needs them;

" Graduate medical education programs are struggling to survive so they can continue to train the State's future healthcare workforce; and

Private hospitals report they are hemorrhaging red ink in the post-Katrina economic environment.

Meanwhile, two years have passed since Veterans Affairs (VA) and the State lost their major hospitals in downtown New Orleans. However, not a shovel of dirt has been lifted to rebuild them. That is a simply outrageous situation for our country.

The people in the New Orleans region, and the wounded and maimed veterans returning to their homes, deserve to have these vital institutions rebuilt and rebuilt now. Likewise, the citizens of New Orleans need to have their public hospital rebuilt and rebuilt now. The uncertainty, particularly with respect to the VA's plans, is almost as damaging as the absence of the hospitals themselves.

I wish to thank our Subcommittee Chairman, Representative Bart Stupak, and our Subcommittee Vice-Chairman, Representative Charlie Melancon, for their leadership on these issues. Mr. Melancon has been heavily engaged in helping his own district, which is adjacent to the four New Orleans parishes, recover from these storms. I look forward to hearing from our witnesses today about the path ahead.

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